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Commission on Narcotic Drugs
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Agenda item 5 (a)
Implementation of the Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem: follow-up to the high-level review by the Commission on Narcotic Drugs, in view of the special session of the General Assembly on the world drug problem to be held in 2016: demand reduction and related measures

Argentina, Austria, Canada, Chile, Colombia, Costa Rica, Croatia, Cyprus, El Salvador, Germany, Greece, Guatemala, Hungary, Israel, Italy, Lithuania, Portugal, Republic of Korea, Republic of Moldova, Serbia, Sweden and the former Yugoslav Republic of Macedonia: revised draft resolution

Supporting the availability, accessibility and diversity of scientific evidence-based treatment and care for children and young people with substance use disorders

The Commission on Narcotic Drugs,

Recalling the Single Convention on Drugs of 1961,[1] that Convention as amended by the 1972 Protocol,[2] the Convention on Psychotropic Substances of 1971[3] and the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988,[4]

Recalling especially article 38 of the Single Convention on Narcotic Drugs of 1961 as amended by the 1972 Protocol, according to which parties to the Convention shall give special attention to and take all practicable measures for the prevention of abuse of drugs and for the early identification, treatment, education,

[1] United Nations, *Treaty Series*, vol. 520, No. 7515.
[2] Ibid., vol. 976, No. 14152.
[3] Ibid., vol. 1019, No. 14956.
[4] Ibid., vol. 1582, No. 27627.

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aftercare, rehabilitation and social reintegration of the persons involved and shall coordinate their efforts to these ends,

Bearing in mind the Convention on the Rights of the Child,[5] which provides in its article 33 that States parties should take all appropriate measures, including legislative, administrative, social and educational measures, to protect children from the illicit use of narcotic drugs and psychotropic substances as defined in the relevant international treaties, and to prevent the use of children in the illicit production and trafficking of such substances,

Recalling the Political Declaration adopted by the General Assembly at its twentieth special session[6] and the determination of Member States to provide the necessary resources for treatment and rehabilitation and to enable social reintegration so as to restore dignity and hope to children, young people, women and men with substance use disorders,

Reaffirming the Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem,[7]

Bearing in mind that children and young people are our most precious asset and must be protected,

Noting with grave concern the decrease in the age of children and young people with substance use disorders in some countries,

Stressing the importance of a multisectoral and fully coordinated approach in which multiple government agencies and non-governmental organizations within communities cooperate, in accordance with national legislation, in order to support the development of a full continuum of policies and programmes that promote prevention, early identification and intervention, treatment, care, rehabilitation, social reintegration, sustained recovery and related support services, as appropriate,

Recalling its resolution 57/6 of 21 March 2014 and the need to provide specialized training and supervision for health and social care professionals, including professionals in civil society, who work with young people with substance use disorders,

Recognizing the special needs of young people with substance use disorders, including those with co-occurring problems such as mental health and family issues, and the related necessity of providing scientific evidence-based substance use disorder treatment and care services, in accordance with national legislation, using a range of scientific evidence-based interventions individually tailored to address the severity of the problem,

Recognizing also the efforts of the United Nations Office on Drugs and Crime and the World Health Organization to raise awareness of drug use disorders and the special needs of young people, and to provide technical assistance to Member States to improve the services available for young people with substance use disorders,

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[5] Ibid., vol. 1577, No. 27531.

[6] General Assembly resolution S-20/2, annex.

[7] See *Official Records of the Economic and Social Council, 2009, Supplement No. 8* (E/2009/28), chap. I, sect. C.

Emphasizing the need to ensure access for young people to equal and adequate scientific evidence-based substance use disorder treatment, and simultaneous access to information on healthy lifestyles, including for young people in the prison system, in accordance with national legislation,

Acknowledging with concern the barriers that prevent young people from accessing youth-friendly services for the treatment and care of drug use disorders, such as mental health disorders, including barriers such as negative labelling and fear of social, employment or legal repercussions, as well as acknowledging with concern the lack of differentiated services, the lack of effective scientific evidence-based treatment programmes and the lack of resources or fear of negative consequences, including within and for their families,

Stressing the importance of taking into account human rights obligations in the implementation of substance use disorder treatment programmes and policies, particularly those focusing on young people, families and communities,

Recognizing the need to take into account individual differences among young people such as age, developmental stage, gender, educational and cultural background, severity of substance use disorders, consumption patterns, polydrug use and co-morbidity, when developing differentiated scientific evidence-based substance use disorder treatment and care services,

Stressing that scientific evidence-based treatment approaches may benefit from the inclusion of family members, community members or other significant individuals,

1. *Invites* Member States, in accordance with their national legislation, to consider means, as appropriate, to provide measures to encourage non-discriminatory attitudes towards children and young people with substance use disorders, to help reduce marginalization and discrimination and to promote scientific evidence-based treatment, with a public health perspective, sustained recovery and social reintegration, partnering with different levels of governmental authority, including but not limited to ministries and local authorities for welfare, health and education and, where appropriate, with civil society and communities in the context of drug demand reduction efforts;

2. *Encourages* Member States to provide scientific evidence-based substance use disorder treatment and care services that take into account a public health perspective and are sensitive to the needs of young people with substance use disorders and which take into account factors such as age, gender, educational and cultural background, severity of the substance use disorder and aggravating factors such as polydrug use, consumption patterns and co-morbidity, to increase the coverage of existing programmes, to ensure that programmes are accessible to all, free of discrimination and voluntary, and, whenever possible and in accordance with national legislation, to offer programmes for youth in prisons, during their transition back into society, on probation or in residential care facilities, and to ensure training and supervision for all relevant health and social care professionals working with these populations;

3. *Also encourages* Member States to consider implementing scientific evidence-based treatment and sustained recovery programmes, such as psychosocial

care, for children and young people that may involve the inclusion of family members, community members or other significant individuals;

4. *Further encourages* Member States to continue to gather scientific evidence, in accordance with national legislation and in cooperation with competent organizations, on substance use disorder treatment and care for children and young people, as appropriate, and to share evidence about such treatment and care;

5. *Requests* the United Nations Office on Drugs and Crime, together with other relevant United Nations organizations and other competent international organizations, including the World Health Organization, to continue to gather scientific evidence on successful programmes for the treatment and care of young people with substance use disorders and to provide Member States, upon request, with guidance and assistance in developing strategies and programmes adapted to their national needs;

6. *Invites* Member States and other donors to provide extrabudgetary resources or in-kind contributions to the United Nations Office on Drugs and Crime, in accordance with the rules and procedures of the United Nations, in order to support Member States, upon request, in needs assessment, capacity-building and improving the knowledge and skills of their policymakers, practitioners, researchers and professionals working with young people in the area of substance use disorder treatment.